



The Great Lakes News

Volume 1, Issue 1

www.VAGreatLakes.org

October 2004



Network 12 Director,
Dr. Joan Cummings,
Welcomes you back to
the "Hub of
Excitement"

As we make the turn to a new fiscal year, we anticipate keeping you, our employees more informed of activities within VISN 12. The VA Great Lakes Health Care System, a group of seven VA medical centers and over thirty VA clinics, is dedicated to providing quality, comprehensive health care package to America's veterans. VA Great Lakes serves veterans who reside in northwestern Indiana, northern Illinois, Wisconsin and the Upper Peninsula of Michigan. The VA Great Lakes Health Care System provides the full range of health care services from prevention through cardiac and other organ transplant surgery. Eligible veterans can access services through the VA Medical Center (VAMC) or VA outpatient clinic nearest their home. Once enrolled, veterans may use services at any one of the 1,200 VA locations nationwide, truly making us the "Hub of Excitement." VA operates the nation's

largest integrated medical system, with 158 hospitals and nearly 860 outpatient clinics. As the CARES project rolls out into the networks across our country, you have created an excellent blueprint for VA health care. Because of your commitment to service, our nation's heroes, her veterans, will receive the medical assistance they will need in years to come.

I'd also like to thank our VISN employees for volunteering to assist those in need following the damages by the numerous hurricanes in the past couple of months.

VA Employees Help Floridians Recover from Hurricanes

Nearly 800 Department of Veterans Affairs (VA) employees from around the country have volunteered to assist Florida communities damaged by Hurricane Frances. Hundreds of VA employees are among those affected and it's time for the VA Family to come to their aide.

Many employees, representing clinical, engineering, safety, security, logistics and administrative skills, have been deployed to nearby staging areas to wait for assignments from the Department of Health and Human Services (HHS).

"So far, more than 120 of our dedicated VA employees have gone directly to stricken areas to help with relief efforts," said Secretary of Veterans Affairs Anthony J. Principi. "Individually and in teams, VA people are performing an important part of our mission by providing emergency aid to communities hit by natural disasters."

Principi said VA has chartered busses to transport its emergency response personnel to community centers

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Supporting Our Troops

Iron Mountain VAMC's entry in the community's July 4th parade won an award in the "patriotism" category. Employees at the VAMC created the design to recognize America's fallen heroes.



When members of Iron Mountain's local National Guard Unit returned home after serving 16 months in Iraq, VA staff members were part of the community's welcome

home celebration. Wearing red, white and blue, employees and volunteers (above) gathered around the VA bus, which was parked along the parade route with "Welcome Home" signs. The avenue of flags at the medical center was also displayed. This was a great opportunity to show the returning troops and their families that the VA is proud of what they have done for us and, in turn, we stand ready to meet their future healthcare needs.

The Tomah VA's Federal Women's Program (FWP) sponsored a facility-wide project to collect care packages for our armed forces serving in Iraq and Afghanistan. The project, titled "Any Soldier," exceeded expectations thanks to an outpouring of support by Tomah's staff, volunteers and patients. In addition, Patient Financial Services in Madison collected medical reference materials and burn-treatment supplies from staff at the Madison VA Hospital and the University of Wisconsin-Madison Hospital. According to Audrey Chambers, FWP manager, over 200 individual boxes of supplies for

our military were assembled. Members of FWP "burned the midnight oil" staying until 8:30 p.m. to pack the boxes. In addition to the supplies for the military, FWP is also collecting stuffed animals and school supplies for the children of these war-torn countries. A large collection of Beanie Babies, for example, will be given to children living in harm's way and those who are hospitalized. To learn more about this project, you can log onto www.anysoldier.us

Milwaukee's very own physician, Kenneth Lee, chief of spinal cord injury service was one of the members of the 118th Medical Battalion Company B who was wounded September 12th when the Waukesha-based unit was targeted by a suicide car bomber in Baghdad. Lee was transferred to Walter Reed Army Medical Center for surgery the week of September 19th. Coworkers at Milwaukee were called by him after the bombing to offer assurances that he was all right. He insisted that he wanted to return to Iraq and rejoin Company B.

Call to Duty

Nathan Geraths, director at the Madison VA Hospital, describes his 83 days of duty in Afghanistan as "life changing." He was not called to active duty this time as some of the VISN 12 employees have been.

Geraths previously answered the military's call during the Persian Gulf War, providing service in Europe prior to his retirement as an Army Reservist with 30 years of service. His call to service this time came in the form of an appeal on a weekly Veterans Health Administration Director's conference call for volunteers to help provide leadership to the Rabia Balkhi Women's Hospital in Kabul, Afghanistan.

Tommy Thompson, Secretary of Health and Human Services, contacted Secretary Principi about VA assistance in a multi-agency effort in support of a facility desperately needing help. The statistics were shocking: The maternal death rate in Afghanistan is the second highest in the world, nearly 300 times higher than the U.S.; forty percent of deaths among women of childbearing age are caused by preventable complications related to childbirth; prenatal care is virtually nonexistent; and one in five

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Troops – continued from previous page*

Afghan babies die before reaching their fifth birthday. The Defense Department was re-building infrastructure, and Health and Human Services physicians were training hospital staff and treating patients, but there was a crucial need for leadership.

Geraths was the third VA career executive to lead the efforts to improve the facility. The challenges those individuals faced are nearly unbelievable. It's hard for most of us to imagine a hospital expected to care for an illiterate and high-risk population with no budget, substandard equipment, a high infection rate, an inadequate water supply, unpredictable electricity, sporadic plumbing, an abundance of sewage problems including on the operating room floor, 80 – 100 admissions and forty births daily, no medical records system, no triage system, no emergency room and no system to register patients. These challenges were complicated by the fact that the entire area surrounding the hospital was very crowded and male visitors were not allowed inside.



Geraths drew on his extensive military background to engage two groups of Army military that had access to millions of dollars in emergency relief and nation-building funds. The first group, his host at the military compound in Kabul, was willing to fund projects but had insufficient manpower and expertise to correct the numerous facility failures facing the Rabia Balkhi Women's Hospital. Nat, therefore,

sought the assistance of the Army Corps of Engineers who proved to be a very talented, competent, and willing partner in proposing major construction modifications that would correct the electrical, water, plumbing and sewage inadequacies that plagued the hospital. They enthusiastically threw themselves into the rehabilitation process of the hospital and devised their own creative solutions to problems that were particularly unique to Muslim patients. For instance, they devised foot-bathing facilities in the women's bathrooms so the women could wash their feet before their five daily prayer sessions

Geraths also worked closely with the non-governmental organization (NGO) that was present at the hospital—the International Medical Corps (IMC). This gave him access to some limited discretionary funds that could be used for emergency funding of cleaning detergents, paper needs, and propane gas. It was responsible for thirteen different projects that were minor in nature such as converting the kitchen from wood burning stoves to propane and replacing the porous operating room floors with marble that contributed significantly to the efficiency and cleanliness of the hospital. He also made simple purchases, such as a power drill for the electrician and a chainsaw to cut the wood that was used to heat the cavernous buildings.

He began English classes for the children and for a group of envious doctors who asked him to give up his lunchtime so they could learn how to speak English. Every one of the days he spent at the hospital or at the Ministry of Health brought small but humanistic rewards to this hospital consultant volunteer. But one of the most rewarding aspects of the assignment was to have the burkaed women, who by religious practice were separated from men, accept Nat into their hospital and allow him to move freely about the hospital because they believed he was truly there to help them and improve the welfare of their infant children; 40 births every day with a very uncertain future.

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A New Look for Milwaukee

The landscape on the historic Milwaukee VA campus has changed. The first building was built in 1868 and is still in use. The last opened in July of this year and was dedicated a few weeks ago. It is the new home of the Milwaukee VA Regional Office (RO).

The government does not own this latest addition. It was built - in a year's time - through a process called enhanced use. Simply, a developer builds the building and then leases it to the VA for a specified number of years after which it reverts to the VA. With no construction dollars in the budget, enhanced use was the answer.

The building may be new, but the history of the Milwaukee VA Regional Office can be traced to 1919. At that time, the Federal Board for Vocational Education and the Bureau of War Risk Insurance established a sub-office in downtown Milwaukee.

The Milwaukee Regional Office employment reached a high of 1,781 in March of 1947; today that number is 260.

After a series of moves, the General Services Administration announced in the early 1980's that the building the Regional Office was occupying would be sold. The RO had the option of relocating to the new Federal Building. Rather than do so, it was decided to move to the Medical Center campus which was more fiscally responsible.

The RO staff found their home in a historic building (shown below) on the north side of the grounds built in 1879 for returning Civil War soldiers. This temporary move was for 21 years.



The Milwaukee VA campus is unique. It has all three administrations of the VA at one site: National Cemetery Administration (Wood National Cemetery), Veterans Health Administration (Clement J. Zablocki VA Medical Center) and the Veterans Benefits Administration (Milwaukee Regional Office).

The Milwaukee Regional Office staff, under the Veterans Benefits Administration, provides Wisconsin's veteran community with monetary benefits for service-connected disability, non-service connected pension, survivor benefits, burial benefits and vocational rehabilitation. The annual payments for benefits administered by the Milwaukee RO total some \$1 billion dollars.

The Milwaukee RO is one of 56 operated by the VA nationwide. The RO telephone numbers remain the same, but the address has changed: 5400 West National Avenue, Milwaukee, WI 53214.

Chicago is National Pilot for Homeless Transition Housing

The Jesse Brown VA Medical Center (JBVAMC) is partnering with Catholic Charities of the Archdiocese of Chicago as part of a national pilot program to develop transitional housing for homeless veterans. A site at 7750 S. Emerald Avenue, the former St. Leo Church Parish, will serve a tenant population comprised of chronically homeless and mentally ill veterans.

VA will also open a new community based outpatient clinic located one block away at 7731 S. Halsted Street. The 16,000 square-foot building, encompassing the clinic on the ground floor and a Veterans Readjustment Counseling Center on the second floor, will offer primary care and specialty services, including dental care, mental health counseling, job training, a computer lab and offices for the VBA and Department of Labor.

Besides serving veterans living in the St. Leo Residence, the clinic will also provide increased access to care for over 8,000 veterans living in the area who are already served by the Jesse Brown VAMC.

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JBVAMC Director Richard Citron said VA estimates that the six-county metropolitan Chicago area may include as many as 18,000 homeless veterans. "This is an opportunity for homeless veterans in Chicago to live in a safe and sober environment while they obtain employment, improve their ability to live independently and attain financial stability," Citron said.

The veterans will live in 141 studio apartments, each with its own kitchen and bathroom. The building also includes common recreational and meeting areas, as well as off-street parking. Its location offers easy access to public transportation, grocery and other stores, pharmacies and restaurants.

As conditions to remain in the residence, veterans will be required to seek or maintain employment, attend counseling sessions and remain sober. Rental fees will be as low as \$250 per month. Besides the access to medical services, mental health counseling and job training provided by VA, veterans in the residence will receive case management supportive services from Catholic Charities, including a "housing locator" to assist veterans with the transition to housing in the community of their choice and a community liaison to meet with area business leaders to pursue employment opportunities.

New and Retiring Leaders

Making Hines the "Provider of Choice" for veterans as well as the "Employer of Choice" for employees, are two top priorities for **Jeff Gering**, new associate director for Hines. Gering, who came to Hines from the Jesse Brown VA Medical Center in Chicago in late June, brings a unique perspective to the facility.



*Jeff Gering,
new Associate
Director at Hines
VA Hospital*

In addition to gaining valuable experience at another VISN 12 facility, he has held key positions at the Washington DC VAMC, as well as in VA Central Office.

Paul G. Noury, associate director of the VA Medical Center in Iron Mountain, Michigan will retire on October 1, 2004, with 30+ years of federal service. Noury has served as associate director of the Iron Mountain facility since August 16, 1998. The Nourys will be relocating to the Massachusetts area and plan to own and operate a small retail store.

Janice M. Boss has been named director of the Iron Mountain VA Medical Center. She is currently serving on a special assignment in Florida and is expected to arrive in Iron Mountain in October 2004. Boss comes to Iron Mountain from an associate director position at the VA San Diego Healthcare system. Her appointment follows the transfer of former VA medical center director, Deborah A. Thompson, to VAMC Prescott, AZ.



*Janice M. Boss,
new Director at
Iron Mountain VA
Medical Center*

Chief of staff, **Dr. Brian Schmitt**, and co-chief of staff, **Dr. Prakash N. Desai**, announced their farewells to Jesse Brown VA Medical Center. After 26 years of service, Dr. Desai retired, effective September 4, 2004. Ironically, that was the same date the chief of staff Dr. Brian Schmitt, left the medical center to assume a new position as chief, medical service at Hines VA Hospital. Richard Citron, director for the Jesse Brown VAMC extended his appreciation to both physicians. Citron also announced that **Dr. Subhash Kukreja**, chief, medical service, would serve as acting chief of staff until a permanent replacement is appointed.

Capital Asset Realignment for Enhanced Services (CARES) Update

On February 8, 2002, the Secretary of Veterans Affairs, Anthony Principi, approved the CARES Study for VISN 12. Subsequently on August 21, 2002, the Secretary approved the CARES Decision document, which approved the options developed under the CARES Study for the VISN 12 facilities. Exciting things have been happening in the network since this decision was approved.

The look of **Hines** is changing every day. Employees and patients who drive through the main gates of Hines on a regular basis can't help but notice how quickly the construction on the facility's new Spinal Cord Injury and Blind Rehabilitation Centers, located in front of the main hospital building, is moving along. Construction of the new buildings is scheduled to be complete this winter, and SCI and Blind Rehab employees are looking forward to moving to the new buildings before the spring of next year.

According to Fran Jiracek, medical administrative specialist in the SCI Unit, the staff is looking forward to the opening of the new center with great anticipation. "Those of us who have been part of the spinal cord family for many years watched the Quonset huts that formerly housed spinal cord patients on Loyola grounds, move in the 1960's to the "new" hospital, Building 200.

Architect's rendering of new SCI Unit at Hines



We now begin a new era of specialty care to these special veterans who gave so much, by moving into our new state-of-the-art facility. It really is wonderful to be a part of such an important project."

The current Blind Center has been in Building 13 since 1971. It is an old nurses' dormitory, with relatively narrow corridors and a limited number of bathrooms. Upon completion, the new Blind Center will offer 59,159 square feet of modern and updated accommodations to patients from a 14-state catchment area. It will have much wider hallways, individual bathroom facilities for each patient, and will be handicapped-accessible.



Architect's rendering of the new Blind Center at Hines

A team of Hines employees has been working hard over the past several months to get the Centers up and running. In addition, Voluntary Service is helping raise additional funds for the new buildings by offering veterans as well as employees an opportunity to donate money for a personalized brick that will be on display in the courtyards of the new buildings. "These bricks in the beautiful courtyards of the new buildings will be part of a lasting tribute that will live on at Hines for many years to come," said Bonnie Gunter, voluntary service chief.

Rita Bond, public affairs officer at **Iron Mountain VAMC** reported on September 21st that the new intensive care/inpatient unit on the fourth floor (east) of the medical center was open. ICU patients were moved on the 20th and the inpatients on 3-West were moved on the 21st. "The Unit is state-of-the-art and a dream come true for Iron Mountain," said Bond.

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Groundbreaking ceremonies will be held this fall for the construction of a new patient bed tower at the **Jesse Brown VAMC**. VA Central Office awarded the contract on September 30th. Completion of the building is anticipated in spring, 2007. The new addition will include 200 patient beds, seven operating rooms and a cystology room. Half of the patient rooms will be private and the remainder will be semi-private, with no more than two beds in each room. The building will also include a chapel, SPD and a vending area with tables for eating. The building's lobby will also include a memorial to former VA Secretary Jesse Brown, for whom the medical center is named.

North Chicago VAMC (NCVAMC) and Naval Hospital Great Lakes (NHGL) have been involved with sharing resources for many years, but nothing of the magnitude that lies ahead as they develop a joint venture that will benefit veterans, active duty and dependents. In October 2002, former Under Secretary for Health, Dr. Roswell and Assistant Secretary of Defense for Health Affairs, Dr. Winkenwerder, signed a VA/DoD Executive Council Decision Memo. The memo approved the planning for NHGL to shift all inpatient services: mental health, medicine, and surgery, as well as emergency room services to NCVAMC. Since that approval, VISN 12, NCVAMC and NHGL have been planning for this joint venture.

The first major phase was completed on October 28, 2003, when all of Navy's inpatient mental health was moved to NCVAMC and patients are being cared for by a multidisciplinary VA treatment team. NHGL also has liaisons working with the VA treatment team staff in the care of the patients. The majority of the patients are Navy recruits.

The next major phase in the joint venture is the renovation of surgery and emergency room areas at NCVAMC. This project was awarded on September 30th, at a cost of \$13 million. Actual renovation will begin in January or February of 2005. The renovation will occur at NCVAMC and provide four new operating rooms on the second floor of Building 133 and a substantially expanded emergency room

in what is now the acute evaluation unit. Completion of the work is targeted for May 2006. Once the work is complete, all of Navy's inpatient medicine, surgery, pediatrics and emergency room services will then be shifted to North Chicago VAMC. This will be a milestone for both VA and Navy, since nowhere else in the country will there be such a relationship.

The last major phase will be the construction of a new federal ambulatory care center (FACC), which is being planned at North Chicago VAMC. Construction of the FACC should begin in 2007 or 2008.

The **Tomah VAMC** received \$10 million in CARES funding for the remodeling of two floors in Building 400. The third floor was designed for an expansion of primary care and specialty clinics, and the fourth floor will be the home of a new 17 bed acute medical unit.

Veterans and staff moved from Bldg. 400 in September 2003, and construction started. By September 2004, the third floor was basically complete and contractors were working on the final "to do" list or "punch list" that was developed after the architect inspected the floor. The clinics will open in early October, and the inpatient ward on the fourth floor will be moving in early November. An open house is being planned for early November.



Remodeling at Tomah VAMC - A nurse's station is enclosed in paned windows, and the new terrazzo floor is shown in this photograph

Network News and Awards

HINES

Jack Hetrick, director, is Chairman of this year's Chicago-area Combined Federal Campaign.

Bonnie Gunter, chief of voluntary service selected as the recipient of a prestigious international volunteer award. The AVA Award recognizes outstanding leaders in the international voluntary community.

Jerry Layne, major league baseball umpire, visited some very enthusiastic Hines patients when he was in town to umpire a Chicago Cubs game. Layne is visiting medical centers throughout the country as part of the DAV's Celebrity Tours.

Excellent Teamwork - Several VISN facilities pitched in to help Hines staff clean up after a fire occurred on the 11th floor of Building 200 last month. Thanks to staff at the Jesse Brown and North Chicago VAMC's for their valuable assistance of supplies and personnel. This is another illustration of the VA family pitching in to help each other in an emergency.

NORTH CHICAGO

The **American Legion Auxiliary Department of Illinois** donated \$1,800.00 in an effort to promote art and music programs for the hospitalized veterans as a means of therapy.

The **Disabled American Veterans Chapter 83** donated a van to be used to bring veterans from the community to their medical appointments. The Chapter raised the entire amount for the van by selling 20,000 forget-me-nots in a 3-year period.



The **1st Annual Car Show** for veterans was held on Saturday, July 31st. The oldest entry was a 1921 Stutz Fire Engine all the way through automotive history to a 2002 Ferrari 575M Maranello.

MADISON

New Outpatient Clinic - Freeport Community Based Outpatient Clinic opens in Freeport, Il. The clinic will provide primary care services closer to home for the veterans of northwest Illinois.



Madison VA Medical Center Director Nathan Geraths (left) and Illinois Congressman Don Manzullo (right) open the new outpatient clinic in Freeport, Illinois.

Lynnae Mahaney, chief of pharmacy service named "Pharmacist of the Year" by the Pharmacy Society of Wisconsin. This award recognizes evidence of being a professional role model, demonstration of outstanding service to the profession, improved patient care, commitment to community service and collaborative relationship with the health care team.

Dr Alan Bridges, chief, medical service voted by the medicine residents to receive the 2004 Professionalism Award at the University of Wisconsin Department of Medicine. The award is presented to the faculty member the residents feel demonstrates: altruism; accountability to patients, the public and their profession; commitment to excellence; sense of duty, honor and integrity; humanism and empathy and respect for others.

Dr. Adrian Matic, anesthesiology service voted the 2004 Teacher of the Year at the University of Wisconsin Department of Anesthesiology. This is the second consecutive year that the anesthesiology residents voted Dr. Matic Teacher of the Year.

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PFS Doesn't Meet Goals...They Beat Goals!!!

The \$8 million dollar "3-PEAT" trophy was created by the Employee Morale Brigade Committee, Patient Financial Services. PFS employees take great pride in their achievements so the committee had the idea of recycling an old "8-ball pool tournament trophy" to remind folks that great things happen when you work as a TEAM. So, an old trophy, PFS trinkets, a little fingernail glue and *Voila!* ...the VISN 12 PFS Trophy was created! *Creativity thrives through limited resources.*

The trophy, initially presented to Debbie Miller, PFS manager, and Stan Johnson, business office director, in honor of collecting \$8 million dollars in 3 consecutive months with August collections exceeding \$9 million, was later presented to Dr. Joan Cummings (below), VISN 12 network director.



GLAC

The Great Lakes Acquisition Center employees and Dr. Cummings accept on behalf of VISN 12, the **Secretary's Socioeconomic Achievement Award for Fiscal Year 2003**. Pictured in the photo below are (from left) Laura Silguero, Michael Cunningham, GLAC employees; Scott Denniston, director of the Office of Small and Disadvantaged Business Utilization Center for Veterans Enterprise and Dr. Cummings, network director, VISN 12.



Armed military personnel provided the daily transportation and protection for Geraths in his commutes from the housing compound to and back from the hospital. He was required to wear a bulletproof vest during that transportation. The housing was provided in a U. S. military compound of older Afghan homes leased by the military, surrounded by walls and fortification. Each room was used for multiple purposes but basically housed up to 12 people by putting bunk beds in all available space. He slept in a storeroom in the rear of the house, in a sleeping bag on an army cot that had a three-inch foam pad on it. The room was approximately 8 feet by 10 feet, with only the cot as furniture. His clothes were hung on two 6-penny nails, the rest remaining in his suitcase. Other items were kept in Meals Ready to Eat (MRE) packing boxes. There were three working showers, but water was not always available for the 40+ occupants of the safe house Geraths occupied. So he would rise early at a quarter to five each morning to assure he could shower and shave before the actual workday began. He used that early morning time to reflect on the activities of the day before and to plan what simple achievement he might attain that day. His digital camera was his constant partner because every day provided a unique experience that could best be explained by a photograph.

The Afghan women believed that if their faces were photographed, the camera would house their soul, but they did not believe the same was true of children. So, they frequently begged Nat to film their children and then were delighted in seeing the instant reply on the digital screen.

One sobering adjustment for Geraths, who had served 30 years in the Reserve and active duty, was the ever-present danger of living in a war zone. This threat was constantly reinforced by the requirement that two armed Army shooters accompany Nat wherever he traveled and, of course, the ever-present ceramic bulletproof vest—all 30 pounds of it!

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and shelters to provide nursing and medical care to people who are sick, injured or at risk of illness due to age in Ft. Pierce, Indian River and St. Lucie.

In support of the Federal Emergency Management Agency, VA has deployed four teams to the area. Each consists of 15 nurses, one pharmacist, one area emergency manager, one driver and one administrative clerk. Four VA emergency managers in Miami coordinate their activities.

The Gulf Coast cleans up after hurricane Ivan even as Floridians continue to recover from Hurricane Charley & Frances. Many suffered tremendous personal losses and many remain without essential services such as electricity.

The week of October 18-22 has been designated the "VA Week of Giving," said Secretary Principi. Canteen Service will take the lead in conducting this drive, working with facility Employee Associations. Please consider donating to our VA family members who may have lost everything. Thank you for your support of this worthwhile project.

Geraths found, however, that the people of Afghanistan, outside of the marauding Taliban, were very appreciative of the efforts being made to rebuild their nation. They are a proud people with many martyrs and with a great deal of psychological and physical hardship, but intensely Afghan and desirous of a return to peace and prosperity.

Upon returning from his duty in Afghanistan, Geraths provided a presentation for the hospital staff. After seeing photographs of the stark conditions being faced by the patients of the hospital in Kabul, a group of Madison employees initiated a hospital-wide collection of comfort items to support that facility. Toiletries, paper products and a wide variety of other items were shipped to Kabul in support of the efforts Geraths participated in there.

The Great Lakes News is published for employees and stakeholders in the VA Great Lakes Health Care System. Submissions can be sent to Linda.deraad@med.va.gov or to VA Great Lake Health Care System, P.O. Box 5000, Building 18, Hines, IL 60141-5000. Electronic subscriptions are available through our web site at <http://www.VAGreatLakes.org>.

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